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EmergenceHealthNetwork.org

October 15, 2020

The Honorable Senfronia Thompson, Chair House Committee on Public Health P.O. Box 2910 Austin, TX 78768

RE: Response to the Formal Request for Information for Interim Charge 2: Review how Texas is preparing for state and federal budgetary changes that impact the state's health programs, including: the next phase of the 1115 Healthcare Transformation and Quality Improvement Program Waiver.

Dear Chairwoman Thompson and Committee Members:

I hope this letter reaches you in good health and spirits, all things considered. On behalf of Emergence Health Network, we appreciate the opportunity to submit written testimony and information related to the next phase of the 1115 Healthcare Transformation and Quality Improvement Program Waiver.

El Paso County, as well as the entire state of Texas, have made incredible progress towards ensuring that people with serious mental illness (SMI), including people with intellectual disabilities, co-occurring conditions of substance use disorders, and chronic health conditions, have continued access to coordinated care. Granting a one year extension to the 1115 Delivery System Reform Incentive Payment (DSRIP) program that was slated to end in October 2021, will continue to advance behavioral health care access for some of the most vulnerable members of our community.

Effective and efficient mental health treatment cannot be adequately covered under current Medicaid rates. The true cost of services cannot be sustained without an extended approach, as many individuals with SMI are uninsured and at high risk of falling in the cracks of an expensive system, oftentimes needing emergency care and engaging in the criminal justice system. DSRIP has been key to meeting the unique health care needs of communities across Texas, including El Paso, and substantially improving health outcomes.

At EHN, we stand behind the Texas Council of Community Centers' recommendations for designing a sustainable system of care for adults with SMI and co-occurring chronic health conditions, and explore strategies that promote collaborative, integrated care. This year, we became a Certified Community Behavioral Health Clinic (CCBHC), which will allow us to initiate a value-based, directed payment strategy through managed care that supports a range of quality services for persons with SMI. By creating a target population for adults with SMI and establishing statewide access to CCBHCs, our state will experience decreases in uncompensated care, inappropriate use of the emergency department, inpatient utilization, potentially preventable readmissions, and inappropriate use of jails and other criminal justice resources. Both the individual and the community at all levels benefit from ready access to the right care at the right time and place.

One of the biggest barriers to care is that as the complexity of the needs of individuals in crisis and the demand for mental health and substance abuse services continue to grow, there's an increased need for additional partnerships with law enforcement, the judiciary, and other providers of community services, hospitals, citizens, and mental health advocates, including persons who have benefited from services. The ongoing COVID-19 crisis has only exacerbated these needs, especially for low-income Texans. As providers, we need to undertake initiatives to improve how care is delivered and continue to expand risk-based managed care to new populations and improve quality care while curbing costs.



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As you evaluate Interim Charge 2, we urge you and the Legislature to consider increased support for DSRIP sustainability and other innovations to more adequately cover the needs of mental health services for countless El Pasoans and Texans.

Sincerely,

Elisa M. Tamayo Director of Policy and Governmental Affairs Emergence Health Network